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(Re	equestor's Name)	
(Ad	ldress)	
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SECRETARY OF STATE

K. SALY MAY -2 2017

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: MICHGUE BRISSON LLC. (Name of Limited Liability Company)			
The enclosed Articles of Dissolution and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
MICHTULE BILSSON (Name of Person)			
MICHEUR BRISSON, LLC (Firm/Company)			
2204 LAKE OSBORNE DR #1L			
City/State and Zip Code)			
For further information concerning this matter, please call:			
MICHELLE BIISSON 541, 729 5717 (Name of Person) (Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount: \$\sum{25.00}\$ Filing Fee and Certificate of Dissolution} \$\sum{555.00}\$ Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)}			

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED 2017 MAY = 1 PM 4: 32 TALL RETARY DE

The name of a limited liability company is	ALL AHASSEE. F
	isson, lic
2. The Articles of Organization were filed on April 28, 2	Oldand assigned
document number L 16000071680	•
3. The delayed effective date the dissolution if not effective on the date of filing (effective date cannot be prior to or more than 90 days later than dat Note: If the date inserted in this block does not meet the applicable statutory filing listed as the document's effective date on the Department of State's records.	ng: ADC(128, 2017 e document is received for filing) g requirements, this date will not be
4. A description of occurrence that resulted in the limited liability company's 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).	- \
for me, Too LITTE	E INCOME
5. If there are no members, enter the name and address of the person appointed activities and affairs:	· · · · · · · · · · · · · · · · · · ·
6. Signature of an authorized person or if there are no members, the signature listed above to wind up the company's activities and affairs:	of the person appointed and
AAVA HELIS	BRISSON
Signature MICHEUE Printe	ed Name

FILING FEE: \$25.00

Signature